DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 08/18/2006

Provider Inspection Summary

For the period 07/01/2003 to 06/30/2006 Adult Family Home STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

Facility Information

Facility Name: BINEW HOME (0010017)

Address: 6118 SANDSTONE DR, MADISON, WI 53719

License Status: REGULAR

Licensed/Certified/Registered 05/27/2003

Regional Office: SOUTHERN REGION (MADISON), (608) 243-2370

Survey History						
Survey ID: 0095958	End Date: 11/22/2005	Type: STANDARD	Purpose: SURVEY			
Results: NO STATEMENT OF DEFICIENCY ISSUED						
Survey ID: 0091180	End Date: 09/30/2003	Type: STANDARD	Purpose: SURVEY			
Results: STATEMENT OF DEFICIENCY ISSUED						
Statement of Deficiency: #10007876 Served 10/10/2003						
	<u>Deficiencies Cited</u> 88.05(4)(d)2.b 88.06(3)(a)	Subject Area FIRE EVACUATION ANNI INDIVIDUAL SERVICE PI		<u>Compliance</u> <u>Verified</u> 11/22/2005 11/22/2005	<u>Corrected</u> Yes Yes	

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